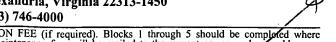
PART B - FEE(S) TRANSMITTAL

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,		MAY 0 3	2000						(Depositor's name)
		· \\Z	0						(Signature)
		CAT & TRA	DEMAR						(Date)
APPLICATION NO.	FILING DATE		FIRST NAME	O INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
09/455,104	09/455,104 12/06/1999		RICHARD ALAN DAYAN			RP9-99-125		4653	
TITLE OF INVENTION: M	1ETHOD AND SYSTEM FO	OR SECURING A	PERSONAL	COMPUTER BUS					
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EΕ	PUBLICATION F	EE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO	\$1400		\$0		\$1400		05/	10/2005
EXAMINER		ART UNIT		CLASS-SUBÇLAS	SS				
COLIN, CARL G		2136		713-200000					
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The end address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. B. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON The ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON The ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON The ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON The ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON The ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON The ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON The ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON The ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON The ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON The ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON The ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED DATA TO BE PRI			or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type)						
recordation as set forth in (A) NAME OF ASSIGN	of this form is NOT	e data will appear on the patent. If an assignee is identified below, the document has been filed for OT a substitute for filing an assignment. 05/05/2005 ANONDAF2 00000067 500563 09455104 (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
International Machines Cor	Armonk, New York 02 F					1400.00 Di 3.00 Di			
	assignee category or categor	ries (will not be pri	nted on the p	atent): 🗖 Individua	al 🏻 Cor	poration or o	other private gr	roup entity	Government
			p. Payment of Fee(s):						
☐ Sissue Fee☐ Sissue Fee (No small entity discount permitted)			A check in the amount of the fee(s) is enclosed.						
Advance Order - # of	Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpaymen Deposit Account Number 50-0563 (enclose an extra copy of this form).						overpayment, to		
	(from status indicated above) MALL ENTITY status. See 3)	_	ant is no longer claimin					
	is requested to apply the Issu ublication Fee (it required) words of the United States Pate								
Authorized Signature	ryv			Date	e	March	8, 2005	5	
Typed or printed name		_		Io. <u>29</u>					
This collection of informatic an application. Confidentiali submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virgi Alexandria, Virginia 22313-	on is required by 37 CFR 1.31 ity is governed by 35 U.S.C. oplication form to the USPTC for reducing this burden, shinia 22313-1450. DO NOT \$1450.	11. The information 122 and 37 CFR 1 D. Time will vary ould be sent to the SEND FEES OR C	i is required (.14. This col depending up Chief Inform OMPLETED	to obtain or retain a bet lection is estimated to son the individual case nation Officer, U.S. Pa PFORMS TO THIS Al	nefit by the take 12 m . Any con tent and T DDRESS.	e public which inutes to con- ments on the rademark Of SEND TO:	ch is to file (an nplete, includi te amount of ti ffice, U.S. Der Commissioner	nd by the US ing gathering ime you requestrement of Cor for Patents,	PTO to process), preparing, and aire to complete Commerce, P.O. P.O. Box 1450,

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